

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000106915

Entity Name: FLORIDA GREEN SOURCE, LLC

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

20 FALCONWOOD CT.
FT MYERS, FL 33919

New Principal Place of Business:

1942 DANA DRIVE
FT MYERS, FL 33907

Current Mailing Address:

20 FALCONWOOD CT.
FT MYERS, FL 33919

New Mailing Address:

FEI Number: 37-1552992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOWD, JEFFREY A P.A.
609 WEST LUMSDEN ROAD
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

JEFFREY A. DOWD, P.A.
609 WEST LUMSDEN ROAD
BRANDON, FL 33511 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: P.JEFFREY A. DOWD, P.A.

04/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BENTON, ROY L JR.
Address: 20 FALCONWOOD COURT
City-St-Zip: FORT MYERS, FL 33919

Title: MGR () Delete
Name: GNAGEY, CRAIG A
Address: 20 FALCONWOOD COURT
City-St-Zip: FORT MYERS, FL 33919

Title: MGR () Delete
Name: BENTON, ROY L III
Address: 20 FALCONWOOD COURT
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROY BENTON

MGR

04/24/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date